

REQUEST

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

For	ving Office	use	only
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International Application No. PCT/FR2004/000108

10/542146
International Filing Date: January 19, 2004

Name of receiving Office and "PCT International Application"
NATIONAL INSTITUTE OF INTELLECTUAL PROPERTY

Applicant's or agent's file reference (if desired) (12 characters maximum) PA1717WO Box No. I TITLE OF INVENTION PHOTOVOLTAIC MODULE COMPRISING EXTERNAL CONNECTOR PINS Box No. II APPLICANT This person is also inventor Telephone No. Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) Facsimile No. APOLLON SOLAR 2, rue Dulong Teleprinter No. F-75017 Paris **FRANCE** Applicant's registration No. with the Office State (that is, country) of nationality: State (that is, country) of residence: **FRANCE** FRANCE the States indicated in the all designated all designated States except the the United States This person is applicant United States of America of America only Supplemental Box for the purposes of: Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S) Name and address: (Family name followed by given name; for a legal entity, full official designation. This person is: The address must include postal code and name of country. The country of the address indicated in this applicant only Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) applicant and inventor **BARET Guy** 21 Rue Jules Ferry inventor only (If this check-box F-38500 Voiron is marked, do not fill in below.) **FRANCE** Applicant's registration No. with the Office State (that is, country) of nationality: State (that is, country) of residence: FRANCE FRANCE This person is applicant for all designated all designated States except the United States the States indicated in the the purposes of: States the United States of America of America only Supplemental Box Further applicants and/or (further) inventors are indicated on a continuation sheet. BOX NO. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE The person identified below is hereby/has been appointed to act on behalf of the agent common representative applicant(s) before the competent International Authorities as: Telephone No. Name and address: (Family name followed by given name; for a legal entity, full official 33 4 76 84 95 45 designation. The address must include postal code and name of country.) HECKE Gérard/ JOUVRAY Marie-Andrée CABINET HECKE Facsimile No. WTC Europole, 5 place Robert Schuman - BP 1537 33 4 76 84 95 48 F-38025 Grenoble Cédex 1 FRANCE Teleprinter No. Agent's registration No. with the Office Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used

instead to indicate a special address to which correspondence should be sent.

Name and address: (Family name followed by given name, for a legal entity, fall digital designation. This person is:	Continuation of Box No. III THER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)			
The address must include post of color and name of country. The country of the address indicated in this person is applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below). State (that is, country) of nationality: FRANCE This person is applicant for all designated all designated states except the United States of America only applicant onl	If none of the following sub-boxes is used, this sheet should not be included in the request.			
State (that is, country) of nationality: FRANCE This person is applicant for	The address must include postal code and name of country. The country Box is the applicant's State (that is, country) of residence if no State of results. LAUVRAY Hubert 22 Chemin de Mordant F-38370 St Clair du Rhône	of the address indicated in this	applicant only applicant and inventor inventor only (If this check-box	
This person is applicant for all designated applicant only applicant only applicant and inventor all designated all designated all designated all designated all designated all designated applicant all designated applicant applicant applicant applicant all designated all designated applicant applicant applicant applicant all designated all designated all designation applicant applicant applicant all designated all designation applicant all designated all designated all designated all designated applicant applicant applicant applicant all designated all designation applicant all designated all designated all designation applicant all designated all desig			Applicant's registration No. with the Office	
Name and address: (Family name followed by given name: for a legal entity, full official designation. This person is: This person is applicant for slates of name and address: (Family name followed by given name; for a legal entity, full official designation. This person is: applicant and inventor inventor only (If this check-box is marked, do not fill in below). Applicant's registration No. with the Office State (that is, country) of nationality: State (that is, country) of national		State (that is, country) of res		
The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) State (that is, country) of nationality: State (that is, country) of residence: This person is applicant and inventor inventor only (If this check-box is marked, do not fill in below.) Applicant's registration No. with the Office State (that is, country) of residence: This person is applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below.) Applicant's registration No. with the Office State (that is, country) of residence: This person is applicant only (If this check-box is marked, do not fill in below.) Applicant's registration No. with the Office State (that is, country) of residence: This person is applicant for all designated in the of residence is indicated below.) Applic				
This person is applicant for all designated states of America of America only Supplemental Box Name and address: (Family name followed by given name: for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant for slit designated all designated states state (that is, country) of rasidence if no State of residence is indicated below.) State (that is, country) of nationality: State (that is, country) of residence: This person is applicant for all designated all designated States except the United States the United States applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below.) Applicant's registration No. with the Office State (that is, country) of residence: This person is applicant for all designated all designated States except the United States the United States applicant only applicant on	The address must include postal code and name of country. The country	of the address indicated in this	applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below.)	
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The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) Applicant and inventor only (If this check-box is marked, do not fill in below.) Applicant's registration No. with the Office State (that is, country) of residence:				
State (that is, country) of nationality: State (that is, country) of residence: This person is applicant for states all designated states except the United States of America only Supplemental Box Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) State (that is, country) of nationality: State (that is, country) of residence: State (that is, country) of nationality: State (that is, country) of residence: This person is applicant for all designated all designated States except the United States indicated in the Supplemental Box	The address must include postal code and name of country. The country	of the address indicated in this	applicant only applicant and inventor inventor only (If this check-box	
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State (that is, country) of nationality: State (that is, country) of residence: This person is applicant for all designated states except the United States indicated in the the purposes of: The States indicated in the States of America only Supplemental Box	The address must include postal code and name of country. The country	of the address indicated in this	applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below.)	
This person is applicant for the purposes of: all designated all designated States except the United States indicated in the United States of America only Supplemental Box			Applicant's registration No. with the Office	
the purposes of: States L the United States of America of America only Supplemental Box			idence:	
Further applicants and/or (further) inventors are indicated on another continuation sheet	the purposes of:	States of America of An		

Box No. VI PRIORIT	TY CLAIR			····	
The priority of the foll	lowing earlier application	on(s) is hereby claimed:			
Filing date	Number	Where earlier application is:			
of earlier application (day/month/year)	of earlier application	national application: country or Member of WTO	regional application:* regional Office	international application: receiving Office	
item (1) 24/01/2003	03 00797	FRANCE			
item (2)					
item (3)					
item (4)					
item (5)				-	
Further priority cl	laims are indicated in the S	Supplemental Box.			
The receiving Office is really if the earlier applied Office) identified above a	cation was filed with the	ransmit to the Internationa Office which for the purp	al Bureau a certified copy o oses of this international ap	f the earlier application(s) oplication is the receiving	
all items ite	em (1) item (2)	item (3)	item (4) item (5	other, see Supplemental Box	
			party to the Paris Convention fo cation was filed (Rule 4.10(b)(i	or the Protection of Industrial i)):	
Box No. VII INTERNA	ATIONAL SEARCHING	GAUTHORITY			
international search, indica	te the Authority chosen; the t	wo-letter code may be used):		s are competent to carry out the	
				r requested from the International	
Date (day/month/year)	Number		Country (or regional Office	îce)	
24/01/2003	03 0079		FRANCE		
Box No. VIII DECLAR	AATIONS				
The following declarations the right column the number		III (i) to (v) (mark the applica	ible check-boxes below and indic	cate in Number of declarations	
Box No. VIII (i)	Declaration as to the ide	ntify of the inventor		:	
Box No. VIII (ii)	Declaration as to the app and be granted a patent	olicant's entitlement, as at the in	nternational filing date, to apply	for :	
Box No. VIII (iii)	Declaration as to the appriority of the earlier app		nternational filing date, to claim	the :	
Box No. VIII (iv)	Declaration of inventors America)	hip (only for the purposes of th	ne designation of the United State	es of :	
Box No. VIII (v)	Declaration as to non-or	eiudicial disclosures or excepti	ons to lack of novelty:	:	

This international application contains:	This international application is accompanied by the following item(s) (mark the applicable check-boxes below and indicate in	Number of items
(a) in paper form, the following number of sheets:	right column the number of each item):	or nems
request (including declaration sheets) : 4 description (excluding sequence listings and/or	 fee calculation sheet original separate power of attorney original general power of attorney copy of general power of attorney; reference number, 	: : 1 :
tables related thereto) : 9 claims : 3	if any:	:
abstract : 1	 5. statement explaining lack of signature 6. priority document(s) identified in Box No. VI as 	;
drawings : 3 Sub-total number of sheets : 20	item(s): 7. translation of international application into	;
sequence listings : tables related thereto :	(language): 8. separate indications concerning deposited	:
(for both, actual number of sheets if filed in paper form,	microorganism or other biological material	:
whether or not also filed in	9. sequence listing in computer readable form (indicate type and number of carriers)	
computer readable form; see (c) below) : Total number of sheets : 20	(i) copy submitted for the purposes of international search under Rule 13ter only (and not as part of the international application)	
(b) only in computer readable form (Section 801(a)(i)) (i) sequence listings	(ii) (only where check-box (b)(i) or (c)(i) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Rule 13ter	:
(ii) ☐ tables related thereto (c) ☐ also in computer readable form (Section 801(a)(ii))	(iii) together with relevant statement as to the identity of the copy or copies with the sequence listings mentioned in left column	:
(i) ☐ sequence listings(ii) ☐ tables related thereto	10. tables in computer readable form related to sequence listings (indicate type and number of carriers)	
Type and number of carriers (diskette, CD-ROM, CD-R or other) on which are contained the	(i) copy submitted for the purposes of international search under Section 802(b-quater) only (and not as part of the international application)	:
sequence listings	in left column) additional copies including, where applicable, the copy for the purposes of	
item 9(ii), in right column)	international search under Section 802(b-quater) (iii) together with relevant statement as to the identity of the	:
	copy or copies with the tables mentioned in left column 11. other (specify): International Search Report	: : 2
Figure of the drawings which	Language of filing of the	
should accompany the abstract: 2 Box No. X SIGNATURE OF APPLICAN'	international application: FRENCH AGENT OR COMMON REPRESENTATIVE	<u> </u>
Next to each signature, indicate the name of the person son Gérard Hecke/ Marie-Andrée JOUVRAY Cabinet Hecke	gning and the capacity in which the person signs (if such capacity is not obvious from re Grenoble, January 19, 2004	eading the request
WTC Europole - 5 Place Robert Schuman BP 1537		
38025 Grenoble Cédex 1, France (FR)		
Date of actual receipt of the purported	For receiving Office use only 2. Dr	awings:
international application: 3. Corrected date of actual receipt due to later b		awings.
timely received papers or drawings completing the purported international application:		received:
Date of timely receipt of the required corrections under PCT Article 11(2):		not received:
5. International Searching Authority (if two or more are competent): ISA /	6. Transmittal of search copy delayed until search fee is paid	
	For International Bureau use only	